## UNI CONTACTES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
2/ = 2 2 1		al/Pater	<del></del>	832269
3 Please refund the following fee(s):		4 PAPER NUMBEI		6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other _			7-7-03	\$ 87.00
		7 TOTAL AMOUNT S 8 2 0		
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
Overpayment		Credit Deposit A/C #:		
Duplicate Payment		, 23-1925		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: / / / / / / TITLE: OFS EXIV				
SIGNATURE: Hicks PHONE: 305-8680				
office: HOD				
THIS SPACE RESERVED FOR FINANCE USE ONLY:  APPROVED:				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B